



**Notice:** Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

**KANSAS CORPORATION COMMISSION 1066288**  
**OIL & GAS CONSERVATION DIVISION**  
**WELL PLUGGING RECORD**  
 K.A.R. 82-3-117

Form CP-4  
 March 2009  
**Type or Print on this Form**  
**Form must be Signed**  
**All blanks must be Filled**

OPERATOR: License #: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address 1: \_\_\_\_\_  
 Address 2: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Type of Well: (Check one)  Oil Well  Gas Well  OG  D&A  Cathodic  
 Water Supply Well  Other: \_\_\_\_\_  SWD Permit #: \_\_\_\_\_  
 ENHR Permit #: \_\_\_\_\_  Gas Storage Permit #: \_\_\_\_\_  
 Is ACO-1 filed?  Yes  No If not, is well log attached?  Yes  No  
 Producing Formation(s): List All (If needed attach another sheet)  
 \_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
 \_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_  
 \_\_\_\_\_ Depth to Top: \_\_\_\_\_ Bottom: \_\_\_\_\_ T.D. \_\_\_\_\_

API No. 15 - \_\_\_\_\_  
 Spot Description: \_\_\_\_\_  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
 \_\_\_\_\_ Feet from  North /  South Line of Section  
 \_\_\_\_\_ Feet from  East /  West Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
 County: \_\_\_\_\_  
 Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_  
 Date Well Completed: \_\_\_\_\_  
 The plugging proposal was approved on: \_\_\_\_\_ (Date)  
 by: \_\_\_\_\_ (KCC District Agent's Name)  
 Plugging Commenced: \_\_\_\_\_  
 Plugging Completed: \_\_\_\_\_

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Plugging Contractor License #: \_\_\_\_\_ Name: \_\_\_\_\_  
 Address 1: \_\_\_\_\_ Address 2: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
 Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Name of Party Responsible for Plugging Fees: \_\_\_\_\_  
 State of \_\_\_\_\_ County, \_\_\_\_\_, ss.  
 \_\_\_\_\_  Employee of Operator or  Operator on above-described well,  
 (Print Name)

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.

**Submitted Electronically**

**Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202**

Mike's Testing & Salvage Inc.

P.O. Box 467  
Chase, KS 67524

# Invoice

Date	Invoice #
10/13/2011	12959

<b>Bill To</b>
American Energies Corportion 155 N. Market, Suite 710 Wichita, Kansas 67202

5892  
10571019

P.O. No.	Lease	County
well #4	Huxman-Krehb!	McPherson

Qty	Description	Rate	Amount
20	Hours Rig Time	190.00	3,800.00T
4	Sacks Cement	12.50	50.00T
	Sand	40.00	40.00T
	Casing Cutter	250.00	250.00T
	9-26-11 Rigged up on location, layed down rods and tubing, checked the hole, sanded off bottom to 3335', dug cellar and pit, set in floor and rigged up. 10 Hours.		
	9-27-11 Sand @3325', dumped 4 sacks cement on top with bailer. Tried to pull stretch into casing and casing parted, tried to screw back on casing but couldn't. Layed down 282' of 4-1/2". Ran in tubing to 376', Copeland Cementers tied onto tubing and pumped 50 sacks common and cc, pulled tubing out, waited 1 hour, ran tubing back in and tagged cement @320', pulled tubing up to 290', pumped 170 sacks cement and circulated to surface. Layed tubing down, plugging complete. 10 Hours		
	Sales Tax	7.30%	302.22
<b>Total</b>			\$4,442.22

REC'D OCT 18 2011

# COPELAND

Acid & Cement

POST OFFICE BOX 438  
 HAYSVILLE, KS 67060  
 (316) 524-1225  
 (316) 524-1027 FAX

## Invoice

Page: 1

BURRTON, KS    GREAT BEND, KS  
 (620) 463-5161    (620) 793-3366  
 FAX (620) 463-2104    FAX (620) 793-3536

INVOICE NUMBER:  
**C37272-IN**

**BILL TO:**  
**AMERICAN ENERGIES CORP.**  
**P.O. BOX 516**  
**CANTON, KS 67428**

**LEASE: HUXMAN-KREIBEL 4**

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
09/30/2011	c37272		09/27/2011		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
30.00	MI	CEMENT MILEAGE PUMP TRUCK		0.00	4.00	120.00
30.00	MI	CEMENT MILEAGE PU TRUCK		0.00	2.00	60.00
1.00	EA	CEMENT PUMP CHARGE		0.00	650.00	650.00
50.00	SAX	COMMON CEMENT		0.00	11.25	562.50
3.00	SAX	CALCIUM CHLORIDE - SAX		0.00	40.00	120.00
170.00	SAX	60-40 POZ MIX 2% GEL		0.00	9.25	1,572.50
4.00	SAX	2% ADDITIONAL GEL		0.00	16.00	64.00
227.00	EA	BULK CHARGE		0.00	1.25	283.75
304.50	MI	BULK TRUCK - TON MILES		0.00	1.10	334.95
<b>REMIT TO:</b> P.O. BOX 438 HAYSVILLE, KS 67060		<b>COP</b>		Net Invoice:		3,767.70
		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		MCPCO Sales Tax:		47.45
<b>RECEIVED BY</b>		<b>NET 30 DAYS</b>		<b>Invoice Total:</b>		<b>3,815.15</b>

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Greasol Oil Field Service

Greasol Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code



FIELD ORDER No C 31212

BOX 438 • HAYSVILLE, KANSAS 67060 316-524-1225

DATE 9/27/11 20

IS AUTHORIZED BY: Marion Energy (NAME OF CUSTOMER)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

To Treat Well As Follows: Lease Marion Energy Well No. 41 Customer Order No. \_\_\_\_\_

Sec. Twp. Range \_\_\_\_\_ County Worth State KS

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

Well Owner or Operator

By

Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	30	exchange pump truck	4.50	135.00
	10	exchange pickup	7.00	70.00
	1	Pump Charge (plus)		65.00
	20	Common	22.50	450.00
	1	Exchange (truck)	15.00	15.00
	170	Exchange 2 1/2 gal	9.75	1,657.50
	41	2 1/2 gal sold gal	14.00	574.00
	227	Bulk Charge	3.85	883.75
		Bulk Truck Miles to 157 x 30m = 30m x 12 = 1.10	1.10	1.10
		Process License Fee on _____ Gallons		
<b>TOTAL BILLING</b>				<b>3,767.35</b>

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative Marion Energy

Station KS

[Signature]  
Well Owner, Operator or Agent

Remarks \_\_\_\_\_

**NET 30 DAYS**



# TREATMENT REPORT

Acid Stage No. \_\_\_\_\_

Date 9/27/11 District G.B. P. O. No. C37272  
 Company American Energies  
 Well Name & No. Herman - Kethel #4  
 Location \_\_\_\_\_ Field \_\_\_\_\_  
 County McPherson State Ks

Casing Size 4 1/2" Type & Wt. \_\_\_\_\_ Set at \_\_\_\_\_ ft.  
 Formation: \_\_\_\_\_ Perf. \_\_\_\_\_ to \_\_\_\_\_  
 Formation: \_\_\_\_\_ Perf. \_\_\_\_\_ to \_\_\_\_\_  
 Formation: \_\_\_\_\_ Perf. \_\_\_\_\_ to \_\_\_\_\_  
 Liner: Size \_\_\_\_\_ Type & Wt. \_\_\_\_\_ Top at \_\_\_\_\_ ft. Bottom at \_\_\_\_\_ ft.  
 Cemented: Yes/No \_\_\_\_\_ Perforated from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Tubing: Size & Wt. 2 3/8" hung at \_\_\_\_\_ ft.  
 Perforated from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Type Treatment: Amt. \_\_\_\_\_ Type Fluid \_\_\_\_\_ Band Size \_\_\_\_\_ Pounds of Band \_\_\_\_\_  
 Breakdown \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 Flush \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 Treated from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. No. ft. \_\_\_\_\_  
 from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. No. ft. \_\_\_\_\_  
 from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. No. ft. \_\_\_\_\_  
 Actual Volume of Oil/Water to Load Hole: \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 Pump Trucks No. Used: 300 Std. \_\_\_\_\_ Hp. \_\_\_\_\_ Twin \_\_\_\_\_  
 Auxiliary Equipment 371310  
 Packer: \_\_\_\_\_ Set at \_\_\_\_\_ ft.  
 Auxiliary Tools \_\_\_\_\_  
 Plugging or Sealing Materials: Type \_\_\_\_\_

Well Hole Size \_\_\_\_\_ T.D. \_\_\_\_\_ ft. P.D. to \_\_\_\_\_ ft.

Company Representative Kelso Treater Nathan W.

TIME a.m. (p.m.)	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
2:00	2 3/8"	4 1/2"		On location.
				Mix 50 lbs. Common 3% C.C. @ 353'. (Tes. in 1 hr.)
				Mix 170 lbs. 6% unpar. 4% gel @ 290'. Circulated cement to surface
4:10				
				Thank You!
				Nathan W.